



**TENNESSEE DEPARTMENT OF HEALTH
OFFICE OF VITAL RECORDS
NOTIFICATION OF ORDER OF PARENTAGE AND APPLICATION
FOR A NEW BIRTH CERTIFICATE
Tennessee Code Annotated Sections 36-2-313 and 68-3-310**

Name of Court _____ Today's Date _____
County of _____ City of _____ State of _____
Docket Number _____ Date of Decree _____

SECTION I INFORMATION CONCERNING CHILD

Name of Child Prior to Court Order _____
Social Security Number _____ Date of Birth _____
Place of Birth _____ Sex _____
CITY COUNTY STATE

SECTION II INFORMATION FOR NEW CERTIFICATE OF BIRTH

Name of Child _____
As Determined by Court First Middle Last

FATHER OF CHILD

Full Name _____
Date of Birth _____
Birthplace _____
STATE OR FOREIGN COUNTRY
Residential Address _____
City State Zip Code
Mailing Address (if different) _____
Home Telephone Number _____
Social Security Number _____
Driver's License Number _____
Employer _____
Employer's Address _____
Employer's Telephone Number _____
Health Insurance _____
Policy Number _____

MOTHER OF CHILD

Full Legal Name _____
Full Maiden Name _____
Date of Birth _____
Residential Address _____
City State Zip Code
Mailing Address (if different) _____
Home Telephone Number _____
Social Security Number _____
Driver's License Number _____
Employer _____
Employer's Address _____
Employer's Telephone Number _____
Health Insurance _____
Policy Number _____

INSTRUCTIONS

1. A new certificate of birth will be prepared in accordance with the law upon the completion and submission of this form and a certified copy of the court's order of parentage.
2. Enclose the \$30.00 fee required for preparation and issuance of a new birth certificate. Make check payable to Tennessee Vital Records.
3. Mail to:
**Tennessee Vital Records
Andrew Johnson Tower, 1st Floor
710 James Robertson Parkway
Nashville, TN 37243**